

Date of issue: Friday, 30 June 2017

MEETING:	HEALTH SCRUTINY PANEL (Councillors Chaudhry, M Holledge, Pantelic, Qaseem, Rana, A Sandhu, Sarfraz, Smith and Strutton) NON-VOTING CO-OPTED MEMBERS Healthwatch Representative Buckinghamshire Health and Adult Social Care Select Committee Representative
DATE AND TIME:	MONDAY, 10TH JULY, 2017 AT 6.30 PM
VENUE:	VENUS SUITE 2, ST MARTINS PLACE, 51 BATH ROAD, SLOUGH, BERKSHIRE, SL1 3UF
DEMOCRATIC SERVICES OFFICER: (for all enquiries)	NICHOLAS PONTONE 01753 875120

NOTICE OF MEETING

You are requested to attend the above Meeting at the time and date indicated to deal with the business set out in the following agenda.



ROGER PARKIN
Interim Chief Executive

AGENDA

PART I

<u>AGENDA</u> <u>ITEM</u>	<u>REPORT TITLE</u>	<u>PAGE</u>	<u>WARD</u>
	APOLOGIES FOR ABSENCE		
	CONSTITUTIONAL MATTERS		
1.	Declarations of Interest	-	

AGENDA
ITEM

REPORT TITLE

PAGE

WARD

All Members who believe they have a Disclosable Pecuniary or other Pecuniary or non pecuniary Interest in any matter to be considered at the meeting must declare that interest and, having regard to the circumstances described in Section 3 paragraphs 3.25 – 3.27 of the Councillors' Code of Conduct, leave the meeting while the matter is discussed, save for exercising any right to speak in accordance with Paragraph 3.28 of the Code.

The Chair will ask Members to confirm that they do not have a declarable interest.

All Members making a declaration will be required to complete a Declaration of Interests at Meetings form detailing the nature of their interest.

2.	Election of Chair for 2017/18	-	-
3.	Election of Vice-Chair for 2017/18	-	-
4.	Minutes of the Last Meeting held on 27th March 2017	1 - 6	-
5.	Action Progress Report	7 - 8	-

SCRUTINY ISSUES

6.	Member Questions	-	-
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(An opportunity for Panel Members to ask questions of the relevant Director/ Assistant Director, relating to pertinent, topical issues affecting their Directorate – maximum of 10 minutes allocated).

7.	Update Report on the Reconfiguration of the Borough's Activities Offer for People with Learning Disabilities	9 - 14	All
8.	Progress Update on the Adult Social Care Transformation Programme 2015-2019	15 - 20	All
9.	Frimley Health and Care Sustainability and Transformation Partnership	21 - 26	All
10.	Forward Work Programme	27 - 32	-

ITEMS FOR INFORMATION

11.	Date of Next Meeting - 31st August 2017		
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Press and Public

You are welcome to attend this meeting which is open to the press and public, as an observer. You will however be asked to leave before the Committee considers any items in the Part II agenda. Please contact the Democratic Services Officer shown above for further details.

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Health Scrutiny Panel – Meeting held on Monday, 27th March, 2017.

Present:- Councillors Strutton (Vice-Chair, in the Chair), Chaudhry, Chohan (from 6.44pm), M Holledge, Qaseem and Smith

Non-Voting Co-optee – Colin Pill, Slough Healthwatch representative

Apologies for Absence:- Councillors Pantelic and Cheema

PART I

51. Declarations of Interest

No declarations were made.

52. Minutes of the Last Meeting held on 19th January 2017

Resolved – That the minutes of the meeting held on 19th January 2017 be approved as a correct record.

53. Action Progress Report

Resolved – That the Action Progress report be noted.

54. Member Questions

Following a request by Councillor Pantelic, the Panel received a written statement from the Director of Adult Social Care on the ASC budget 2016/17 and 2017/18. A discussion item on this matter would added to the agenda for the next meeting of the Panel on 29th June 2017.

Resolved – That the Panel receive a report on the Adult Social Care Budget at the meeting to be held on 29th June 2017.

55. Health and Adult Social Care Digital Innovations

A report and presentation was received that updated the Panel on the work taking place locally to digitally transform the delivery of health and adult social care as set out in the Local Digital Roadmap for the Frimley Health and Care System 2016-2021.

Digital innovation would enable residents to take greater control of their wellbeing though self-service portals, self-care apps, and real time data could support professionals access the information required to deliver the best possible outcomes for patients. There were a range of specific initiatives underway and planned as part of the programme involving the Council and NHS partners including a Citizen Portal, smart working, Management Information Systems, Customer Relationship Management and several Connected Care projects to integrate records and improve systems

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intelligence in the health and social care system. It was recognised that there were potentially significant benefits in terms of improved health and wellbeing outcomes and more efficient ways of working freeing up resources to support clinicians.

(Councillor Chohan joined the meeting)

The Panel considered some of the risks increased digitisation, particularly information governance and security. Members sought clarity on how data would be secured and highlighted the importance of clear communication with residents and patients who may be concerned about how their health records may be used. Officers explained the measures in place to manage and protect patient data and provided assurance that projects involving the transfer and sharing of patient data were subject to rigorous compliance frameworks and information sharing agreements which had been approved by the Slough Wellbeing Board. Questions were also raised about the robustness of back up systems in the event of system failures to ensure that patient safety and the delivery of services was not affected. It was responded that each organisations systems operated independently and a series of pilots had taken place which included testing of the resilience of the systems and back ups were in place.

The Panel also discussed the use of smart working practices in GP surgeries; the potential to improve the efficiency of the dispensation of medication; and the performance measures in place to quantify the benefits of digital projects. The potential involvement of wider partners was raised, including Police, Fire services and others. It was noted that a staged approach was being taken and the information sharing barriers would need to be carefully considered.

At the conclusion of the discussion the report was noted.

Resolved – That the report be noted.

56. Five Year Plan 2017-21

The Head of Policy, Partnerships & Programmes and Head of Adult Safeguarding & Learning Disabilities introduced a report on the new Five Year Plan and in particular Outcome 2: 'Our people will become healthier and will manage their own health, care and support needs'.

The Five Year Plan defined the strategic vision, opportunities and challenges for the Council and set out the key priorities behind which resources would be focused. The plan was updated annually and had recently been subject of a substantial refresh including a reduction in the number of outcome priorities from eight to five. The Health Scrutiny Panel was tasked with leading scrutiny of Outcome 2 relating to health and care issues and the key actions to improve the targeting of health checks, preventative activity, community capacity, empowerment and adult safeguarding were considered.

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During a wide ranging discussion, Members commented on the following issues:

- It was important to ensure the widest possible access to leisure facilities, particularly in view of the significant investment the Council was making, and the Panel requested further information on the discounts available to target groups once the new leisure provider was in place.
- Prevention and early intervention were particularly important, including the relationship and communication between social care and housing services. It was noted that new ways of working, including the recent adoption of a locality model in adult social care, would help improve such linkages.
- Relationships with the voluntary sector provided opportunities to engage people and the work the SPACE programme was doing was explained.
- The use of data and intelligence to determine strategic priorities was discussed and it was noted that the Joint Strategic Needs Assessment was evidence based and set out the high level approach.

More generally, the Panel discussed some of the other Five Year Plan outcomes including the performance measure for crime rates. Further information was requested on the action being taken by the Safer Slough Partnership to reduce crime rates per 1,000 population, and it was noted that the Thames Valley Police & Crime Commissioner was due to attend the Overview & Scrutiny Committee meeting in April which would provide Members with an opportunity to discuss these issues in more detail.

At the conclusion of the discussion the Panel noted the report and agreed to receive a further update in six months to include high level performance; any barriers to success; progress on digital innovation; and relationships between wellbeing and housing.

Resolved –

- (a) That the plans in place to achieve Outcome 2 in the new Five Year Plan be noted.
- (b) That the Panel receive an update in six months on the progress being made in delivering Outcome 2 of the plan to include:
 - i. an overview of performance;
 - ii. any issues or barriers requiring additional support;
 - iii. links between wellbeing and housing; and
 - iv. an update on the use of digital technology to help deliver outcome 2.

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57. Slough Wellbeing Board's Annual Report 2016/17

The Head of Policy, Partnerships & Programmes introduced a report that sought the Panel's comments on and endorsement of the draft Slough Wellbeing Board Annual Report 2016-17. The strategic role of Board in co-ordinating Slough's network of partnerships was noted and its key activities over the past year were reviewed.

The Slough Joint Wellbeing Strategy had been reviewed in 2016 with a reduced number of key priorities for partners to collectively focus on. The Board had held its first Annual Conference in September 2016 and it was agreed that Members of the Panel would be invited to the Wellbeing Annual Conference on 21st September 2017. During discussion, Members suggested that the Annual Report include more case studies and examples of practical achievements in support of the high level strategic priorities; and greater input from partners on how their involvement in the Board had made a difference to Slough residents. It was agreed that this feedback would be provided to the Wellbeing Board.

The Panel noted and endorsed the report.

Resolved – That the work underway to evaluate the effectiveness of the Wellbeing Board's key activities and achievements during the period May 2016 to April 2017, as set out in the draft Annual Report, be noted and endorsed.

58. Public Transport Services to Wexham Park Hospital & Healthcare Centres

The Head of Transport & Highways and Assistant Transport Planner introduced a report on the current arrangements for public transport to Wexham Park Hospital and other health care centres. A range of concerns had been raised by Members about the new First Bus timetable and routes; public transport services for Colnbrook residents to access to GP services; and disability access on some buses.

The Panel noted the information provided bus routes closest to each GP surgery in Slough, however, Members commented that in some instances the bus stop was some distance from the surgery and accessibility was a problem. Further information was therefore requested to identify those surgeries some distance from a bus stop and to take account of any complaints received about such accessibility issues. It was agreed that the Chair and Vice-Chair would meet with the transport team to further consider the specific local actions that could be taken to address access issues.

Concern was expressed about the fact that the Dial-a-Ride service was membership based and needed to be booked in advance which made it difficult for appointments due to unpredictable pick up times. In view of the particular difficulties for Colnbrook residents to access health facilities, which

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were detailed by ward members at the meeting, it was suggested that Adult Social Care support the membership costs of disabled residents.

Further to previous scrutiny discussions, Healthwatch Slough was compiling a report on disabled access issues on bus services and it was agreed that this report be considered at the next meeting of the Panel.

Resolved –

- (a) That the report be noted.
- (b) That the further information below be compiled to identify specific issues and evidence at particular healthcare centres, bus stops/routes or other concerns about accessibility.
 - i. The approximate distance between healthcare centres and the bus route/stop identified in paragraph 5.3 of the report; and
 - ii. Complaints received by the Council, Healthwatch and bus service providers in the past three years about accessibility problems relating to bus services and healthcare centres.
- (c) That the Chair, Vice-Chair and Healthwatch representative meet with Transport Officers to discuss the practical improvements required to address concerns at specific locations.
- (d) That the Panel consider the Healthwatch report on disabled facilities on local bus services at the next meeting in June 2017.
- (e) That the Adult Social Care department consider funding the block membership of disabled Colnbrook residents to use the Dial-a-Ride service to access health services following the recent closure of the local surgery.

59. Attendance Record

Resolved – That the Members' Attendance Record 2016-17 be noted.

60. Date of Next Meeting

The next meeting of the Panel would be held on 29th June 2017.

Chair

(Note: The Meeting opened at 6.31 pm and closed at 8.55 pm)

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Health Scrutiny Panel – Actions Arising from Meetings

27th March 2017

Minute:	Action:	For:	Report Back To: Date:
58	<p>That the further information below be compiled to identify specific issues and evidence at particular healthcare centres, bus stops/routes or other concerns about accessibility.</p> <ul style="list-style-type: none"> i. The approximate distance between healthcare centres and the bus route/stop identified in paragraph 5.3 of the report; and ii. Complaints received by the Council, Healthwatch and bus service providers in the past three years about accessibility problems relating to bus services and healthcare centres. 	Healthwatch, SBC Councillors and Transport	HSP ASAP
58	That the Adult Social Care department consider funding the block membership of disabled Colnbrook residents to use the Dial-a-Ride service to access health services following the recent closure of the local surgery.	Adult Social Care	HSP ASAP

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SLOUGH BOROUGH COUNCIL

REPORT TO: Health Scrutiny Panel **DATE:** 10th July 2017
CONTACT OFFICER: Simon Broad, Head of Adult Social Care (Acting)
(For all Enquiries) (01753) 87 5202
WARD(S): All

PART I
FOR COMMENT & CONSIDERATION

UPDATE REPORT ON THE RECONFIGURATION OF THE BOROUGH'S ACTIVITIES OFFER FOR PEOPLE WITH LEARNING DISABILITIES

1. **Purpose of Report**

To provide an update on the progress made in enhancing the range of community based provision for people with a learning disability as requested by the Health Scrutiny Panel meeting held on the 23rd of November 2016.

2. **Recommendation(s)/Proposed Action**

The Health Scrutiny Panel is requested to note the report and the progress being made in enhancing the range of community based services for people with a learning disability.

3. **The Slough Joint Wellbeing Strategy, the JSNA and the Five Year Plan**

3a. **Slough Joint Wellbeing Strategy Priorities –**

The reconfiguration of services for people with a learning disability will meet several of the current Slough Wellbeing Board strategy priorities including:

- Increasing life expectancy by focussing on inequalities
- Improving mental health and wellbeing

Key Needs Assessment Data:

The number of adults with learning disabilities known to Slough's Adult Social Care service is 356. The numbers of people with learning disabilities are projected to increase. In Slough, there were 2,153 adults with learning disabilities in 2007. This number is predicted to increase to 2,644 in 2017 and to 2943 by 2027.

The key areas of inequalities for people with Learning Disabilities are in housing, health and employment. There is a need to develop with people, Carers and partners an activities offer that:

- Promotes social inclusion, supports involvement in community activities and improves access to universal services
- Develops independent living skills and job related skills creating locally based work experience and job opportunities
- Improves health and life expectancy and addresses health inequalities

- Maintains the health and wellbeing of people thereby preventing or delaying their need to access hospital or residential care
- Safeguards people- raising awareness about keeping safe whilst promoting positive risk taking and encouraging involvement in community activities

3b. **Five Year Plan Outcomes**

Services delivered will support the following outcomes in the Five Year Plan

- More people will take responsibility and manage their own health, care and support needs
- Children and young people in Slough will be healthy, resilient and have positive life chances

4. **Other Implications**

(a) Financial

A saving of £347,000 was achieved as a result of the reconfiguration of the borough's activities offer for people with learning disabilities.

The remaining day service buildings, Priors and Phoenix, will require refurbishment and new adaptations to help meet the needs of people with complex needs. The Capital Strategy Board granted £826,000 in September 2016 towards the refurbishment of the Phoenix and Priors buildings. This work will be completed during this year.

(b) Risk Management

Risk	Mitigating action	Opportunities
Legal- challenges have been issued to some local authorities when reconfiguring their day activities offer which has then delayed the implementation of services.	Reviews of all people receiving their activity offer through the community or through a building based day centre are continuing. Families and advocates have been and will continue to be involved in the reviews. No issues have been identified so far	Families and advocates have been and will continue to participate in all reviews of service users who are attending day centres.
Property-minimal risk	None	The Dug and Alcohol Treatment Service has now moved to the site previously occupied by the Elliman Centre following its closure on the 1 st of January 2017.
Human Rights-minimal risk	None	
Health and Safety-minimal risk	None	
Employment Issues- Staff could leave whilst uncertainty	A restructure of the staffing team was successfully carried out and	The new job descriptions provide opportunities for staff to develop activities

remains about the future of in-house services. Vacancies would need to be filled by agency staff which would increase the staffing costs.	implemented on the 1 st of January 2017.	for people with learning disabilities and promote greater integration with the community at large.
Equalities Issues-minimal risk	None	
Community Support-minimal risk	None	
Communications- The need to reconfigure the activities offer is not understood/ not accepted by staff, people and families	Service users and families continue to be consulted as part of the on-going work to ensure that their activities offer meets the needs of service users.	Whilst some service users have been concerned about having their activity offer delivered from the community or from a different building based day centre, others have welcomed the opportunity to access their choice of activity at a time of their choosing with their own friendship group.
Community Safety-minimal risk	None	
Financial –	None	

(c) Human Rights Act and Other Legal Implications

No issues identified.

(d) Equalities Impact Assessment

None identified

(e) Workforce

A new staffing structure was implemented from the 1st of January 2017. This resulted in £65K savings for the period January to March 2017; £347,000 savings in a full financial year.

New job descriptions have supported staff to develop partnerships with other council directorates, voluntary and community organisations. Some staff have welcomed these opportunities and used their new contacts to develop activities that service users can access. Examples of activities that staff have developed include art projects, gardening and allotment work and volunteering opportunities for local social enterprises.

5. **Supporting Information**

- 5.1 The needs of service users and their achievement of the outcomes that are important to them remain paramount when determining their activities offer. Reviews are continuing of all service users who were or are currently having their

activities offer met by the Local Authority. All activities are risk assessed to reduce the potential risk to the service user or to other members of the public. Three service users have elected to attend a day centre in another borough. Other service users have gone onto enjoy the new activities in the community and have flourished.

- 5.2 An update on the service users that were accessing the Elliman, Priors and Phoenix building based services in 2016 is given below.

Elliman Centre. Fifty-seven service users were accessing the service prior to its closure on the 1st of January 2017.

- Seventeen service users are accessing the community activities available at the Britwell Hub. Eleven of the seventeen are also accessing the Priors Day service. Two service users have joined the Recycled Teenagers group which is based at the Britwell Hub.
- Eight of the former Elliman service users moved to the Priors Day service.
- Fifteen former Elliman service users moved to the Phoenix Day service.
- Fourteen former Elliman service users have their activities offer met through either their supported accommodation provider or through other community organisations.
- Three former Elliman service users are currently not taking up the activities offer from the Borough as a result of ill-health or have chosen to withdraw from services.
- Seven former service users who were accessing local authority transport have been supported to either travel independently albeit with the support of a family member or Carer or are using community transport.

Priors Day Service: Forty-five service users were accessing the service in 2016.

- Twenty-one service users access the Priors Day service.
- Six service users have moved to the Phoenix Day service.
- One service user is accessing the Britwell Hub and attending the Priors Day service.
- Thirteen service users are now having their activities offer met through either their supported accommodation provider or through other community organisations.
- Two service users are attending the Priors and Phoenix day services.
- Two service users have chosen to withdraw from services.

Phoenix Day Service: Twenty-four service users are accessing the service.

- Four service users have now moved across to the Priors Day service.
- Four service users continue to access the Phoenix day service.
- Five service users who did not have a learning disability but were accessing the day service are having their activities offer met by other services.
- Seven former service users of the Phoenix day service are now having their activities offer met through either their supported accommodation provider or through other community organisations.
- There are currently vacancies within the Phoenix Day service which will be filled by service users where it is felt that this service would best support them to achieve their outcomes.

- 5.3 Examples of other activities that service users are accessing through the community include music, Langley College, Slough Mencap, Cinema, PALS, bowling and places of worship.

The case studies below exemplify the feedback we have received from service users about the activities that they are currently doing.

Case Study 1

H has a learning disability and Autism with challenging behaviour. H needs one to one support to manage his behaviour and to develop independent and life skills.

H attended the Elliman day centre before its closure in January 2017. H also received thirty hours of one to one support from two personal assistants. By using existing family support networks the number of H's one to one hours was reduced to twenty-four hours.

H now has two personal assistants working with him at the times that he needs support. H is supported to go out to shopping centres. H is learning to use public transport and enjoys going to restaurants. He also goes out for walks in local parks. During the summer H likes to sunbathe in the park. Having a personal assistant has enabled H to live a fulfilling life and to develop his independence skills as much as his abilities can allow.

H's new support plan was reviewed and the family confirmed that both H and his family are happy with his current support plan. The family have reported that the support H receives provides valuable respite for H's main Carer. H's carer has health issues and the support is a protective factor to prevent a Carer breakdown.

Case Study 2

C had attended the Elliman day centre four days a week for a number of years and was in a supported work placement. The reconfiguration of services last year provided C with an opportunity to consider community activities. Initially, both C and her parents were nervous but worked with social workers and day centre staff to look at other activities.

C's weekly activities are now as follows:

- Monday- Britwell Hub
- Tuesday- Craft session at local church
- Wednesday (work experience)
- Thursday- Activities at Chalvey Community Centre provided through Destiny Support
- Friday- Britwell Hub

C also attends Mencap on a Wednesday evening.

The changes to C's activities offer have allowed C to learn to travel independently on her own, to learn how to cook and to make new friends.

6. Comments of Other Committees

None

7. Conclusion

This report outlines the progress made in reconfiguring the borough's activities offer to one which provides opportunities for people with learning disabilities to

learn new skills and integrate with the wider community. Family Carers receive valuable respite from the demands of their caring roles secure in the knowledge that the people they care for are accessing activities which bring them different and new experiences. The closure of the Elliman Centre went well with minimal impact for people who use the service and there have been many letters of support and thanks received by the service.

8. **Appendices:**

None

9. **Background Papers**

None

SLOUGH BOROUGH COUNCIL

REPORT TO: Health Scrutiny Panel **DATE:** 10th July 2017
CONTACT OFFICER: Alan Sinclair, Director Adult Social Care
(For all Enquiries) (01753) 875752
WARD(S): All

PART I
FOR INFORMATION, COMMENT & CONSIDERATION

PROGRESS UPDATE ON THE ADULT SOCIAL CARE TRANSFORMATION PROGRAMME 2015-2019

1. **Purpose of Report**

This report provides the Health Scrutiny Panel with a progress report on the delivery of the adult social care transformation programme and an update on the adult social care budget.

2. **Recommendation(s)/Proposed Action**

The Health Scrutiny Panel is recommended to note the report and the progress being made in delivering the adult social care transformation programme and note the impact of the financial pressures facing adult social care over the next three years.

3. **The Slough Joint Wellbeing Strategy, the JSNA and the Five Year Plan**

3a. **Slough Joint Wellbeing Strategy Priorities**

The adult social care transformation programme will meet several of the current Slough Wellbeing Board strategy priorities including:

- Increasing life expectancy by focussing on inequalities
- Improving mental health and wellbeing
- Housing

3b. **Five Year Plan Outcomes**

The adult social care transformation programme will support the delivery of the following SBC Five Year Plan outcomes:

- More people will take responsibility and manage their own health, care and support needs
- Children and young people in Slough will be healthy, resilient and have positive life chances

4. **Other Implications**

(a) **Financial**

The adult social care budget has been facing increasing pressures over the last three years with increasing demand, increasing prices and a reducing budget. The budget has overspent in the last two years and the outturn for 2016/17 is an overspend of £774k or 2% of the net budget.

The position for SBC is not significantly different than other councils with responsibility for adult social care. The Association of Directors of Adults Social Services (ADASS) in its annual budget survey published in July 2016 identified the standstill shortfall for all councils for social care of £1bn for 2017/18. Local councils are facing increasing demand for social care – ADASS estimates £4bn a year in demographic pressures plus increasing costs, with the national living wage cost alone being £612m this year. Since 2010 councils have been making savings of approx. £1bn a year as the government revenue support grant to councils has been reducing.

The 2017 ADASS budget survey published in June 2017 shows a total spend on ASC nationally of £14.19bn on a net budget of £13.82bn – a 3% overspend compared to a Slough ASC overspend of 2%.

Planned savings for 2017/18 nationally are £824m - 5% of the net ASC budgets and 27% of total council savings. This compares with Slough planned ASC savings of 4% against the net ASC budget and 10% of council planned savings.

ADASS Directors confidence in delivering these savings is only 31% despite additional national funding and this reduces to 8% for 2018/19.

The national budget statements over the last eighteen months have provided adult social care with additional one off funding each year from 2017/18 to 2019/20. This funding is allocated through the Better Care Fund and requires an agreement with the local NHS on how this funding will be used. The total nationally for 2017/18 is £1bn. For Slough this improved Better Care Fund allocation is:

2017/18 £2.173m

2018/19 £2.862m

2019/20 £3.327m

Without this additional funding Slough adult social care would have to make this equivalent level of saving each year in its budget to ensure the adult social care budget is balanced.

After March 2020 there is no guarantee of any further additional national funding so there is a significant risk that the budget for adult social care will need to be reduced by £3.327m at this point although there will be a further national review of adult social care funding as confirmed in the spring budget.

(b) Risk Management

<i>Risk Area</i>	<i>Risk/Threat/Opportunity</i>	<i>Mitigation(s)</i>
<i>Financial</i>	<i>Savings plans not delivered</i>	<i>Action plans in place and regular monitoring. Alternative plans in place.</i>
	<i>Additional national funding ceases after 2019/20</i>	<i>Regular review of national position. Alternative savings to be developed.</i>
<i>Strategy</i>	<i>Key projects in the ASC transformation programme</i>	<i>Action plans in place and regular monitoring of plans. ASC</i>

	<i>do not deliver planned improvements</i>	<i>programme board with senior SBC and partners attendance.</i>
<i>Demand</i>	<i>Demand continues to increase</i>	<i>Regular monitoring of activity. Focus of prevention work.</i>
<i>Integration</i>	<i>Negative impact of integration with the NHS via the STP and Better Care Fund</i>	<i>Regular monitoring of plans and projects Risk share agreements in place for pooled budget</i>

(c) Human Rights Act and Other Legal Implications

There are none identified at this point.

(d) Equalities Impact Assessment

Equality impact assessments have been undertaken for each of the projects within the programme and each of the savings plans. No issues have been identified.

(e) Workforce

There are no specific issues identified at this point.

5. **Supporting Information**

5.1 **Adult Social Care Transformation Programme**

5.1.1 The transformation programme has been focused on both delivering the new responsibilities of the Care Act 2014 but also delivering the adult social care strategy.

The aims of the strategy are:

- Prevent and delay the need for social care services by good information and advice, prevention, reablement, asset based approaches and building community capacity
- Avoid people being in crisis
- Support to carers to continue caring
- Support people to live at home and reduce number of people living in care homes
- Support people to manage their own care and support through direct payments and technology
- Working in partnership with the NHS to deliver integrated services
- Improving quality of local services
- Developing our workforce

5.1.2 The transformation programme started in 2015 and has 25 different projects. Of these 12 have been completed, 11 are still ongoing and 2 have still to be delivered.

The most significant project that has been delivered is the restructure of adult social care into three locality teams with a focus on asset based and strength based conversations and connecting people to the range of supports and services available in their communities.

Other projects delivered are the redesign of the councils internally provided learning disability services, including day services, the new information and advice service provided by SPACE and the redesign of housing related support services.

Of the projects still to be delivered these are related to IT and digital (development of a citizen portal and of an e-market place).

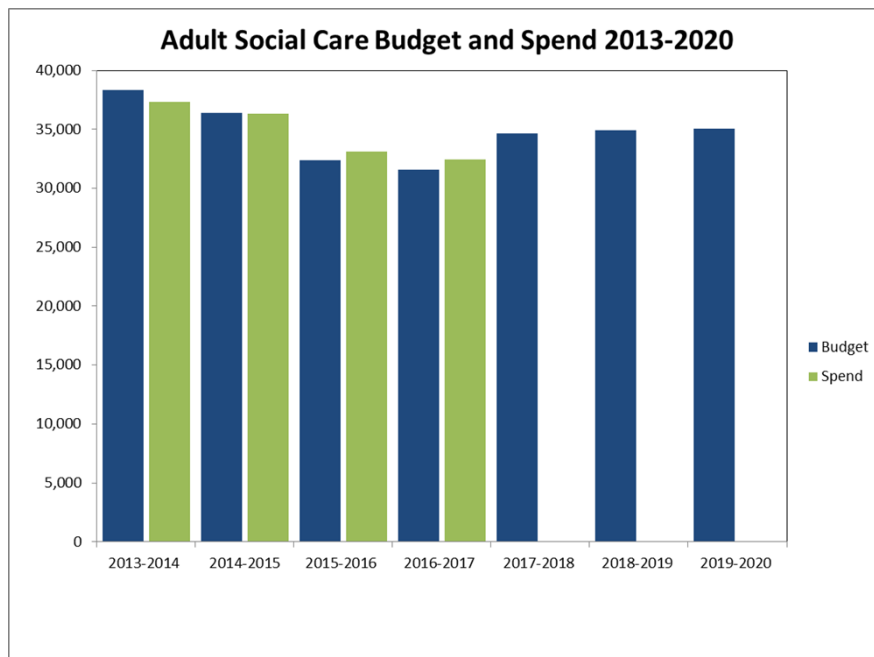
5.1.3 Key successes have been an increase in the number of people managing their care and support via a direct payment, an increase in the number of people supported by the voluntary and community sector, an increase in the number of carers identified and supported, the redesign of the drug and alcohol treatment service and an increase in the number of people with a learning disability and people with a mental health issue living in settled accommodation (not living in care homes).

5.1.4 Key deliverables for the programme over the next few years are:

- Further increases in the number of people managing their care and support through a direct payment, people supported by the community and voluntary sector and carers supported.
- Embedding the new ways of working in the adult locality teams
- Adult social care locality teams to be part of the services provided by integrated health and social care hubs
- Improving the information and advice offer to Slough residents
- Ensuring our prevention and early intervention services are making a difference
- Improving the transition experience of young people moving from children to adult services
- Improving the range of accommodation with care options including supported living and extra care alongside the councils housing strategy.

5.2 Adult Social Care Budget 2013-2020

5.2.1 The table below shows the budget and expenditure 2013-2020



The table shows a reduction of budget due to savings being made from 2013 to 2017, a difficulty in achieving a balanced budget over the last two years and an increased budget due to the additional national funding over the next three years

The base budget for 2017/18 of £32,225m includes additional funding for demography and care act new burdens responsibilities and inflation all funded by

the adult social care precept of 3% (an additional £1.5m) minus planned savings of £1.3m. The national additional funding of £2.173m (treated as a one off additional on top of the base budget) plus a small increase in BCF funding gives us a net ASC budget of £34,625m for 2017/18.

5.2.2 There are three main reasons for the overspends in 2015/16 and 2016/17:

- an increase in the number of people being supported
- an increase in the levels of need for existing clients above the planned and expected levels. This has led to increase in the number of additional domiciliary care hours being delivered for existing clients.
- an increase in the price being paid for care – mostly care home prices – partly related to national living wage increases.

5.3 **Efficiency and Savings Plans**

The transformation programme will deliver savings of over £8m – and has achieved £5.5m so far with the remainder to be delivered over the next three years. The savings profile is:

2015/16 £3.1m

2016/17 £2.4m

2017/18 £1.3m

2018/19 £1m and 2019/20 £1m (provisional figures at present)

5.4 **Impact of demand and price changes**

Although the savings from the programme have been achieved so far there are two main areas that have led to the adult social care budget seeing an increase in spend above budget – these are the impact of increased demand and increases in prices.

From April 2013 to February 2017 the council has seen an increase in the overall number of people supported with long term care needs from 1,275 to 1,371. The biggest increase has been the numbers of people supported to live at home which has increased from 830 to 999.

The average number of hours of care at home has also increased from approx. 8 hours per week to 12 hours per week during this period.

The average price paid for care at home has roughly stayed static at about £15 per hour but the average cost per person over 65 for care at home has increased from £118p/w in April 2013 to £168 p/w in February 2017. The new domiciliary care average hourly price will be increasing to £17.35 during this year which we estimate will cost the council approximately £0.5m more per year.

The average net cost for nursing home placements has increased from £411p/w in March 2013 to £662p/w in February 2017. The average net price paid for a new nursing home placement today is over £700 p/w and this is increasing each month.

6. **Comments of Other Committees**

An update on the adult social care budget was presented to the Overview and Scrutiny Committee meeting held in November 2016. A further update was requested in a year.

7. **Conclusion**

The adult social care transformation programme has led to a major change in the way that the service is provided in Slough. The changes have also delivered efficiency savings that have gone part way to managing increases in demand and also increases in costs. The additional national funding for adult social care that has been allocated to all councils to meet the increasing demands and costs that all councils are facing will help Slough meet the gap between budget and spend over the next three years. There is though a significant risk that if additional funding is not provided after 2020 that further savings will be required from 2020.

The Health Scrutiny Panel is recommended to note the report and the progress being made in delivering the adult social care transformation programme and note the impact of the financial pressures facing adult social care over the next three years.

8. **Appendices Attached**

None

9. **Background Papers**

None

SLOUGH BOROUGH COUNCIL

REPORT TO: Health Scrutiny Panel **DATE:** 10th July 2017
CONTACT OFFICER: Alan Sinclair, Director Adult Social Care
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WARD(S): All

PART I
FOR INFORMATION, COMMENT & CONSIDERATION

FRIMLEY HEALTH AND CARE SUSTAINABILITY AND TRANSFORMATION PARTNERSHIP

1. **Purpose of Report**

This report provides the Health Scrutiny Panel with a further update on progress being made to deliver the Frimley Health and Care Sustainability and Transformation Partnership (STP).

The aim of the Frimley STP is: *'to serve and work in partnership with the Frimley footprint population of 750,000 people, through the local system leaders working collaboratively to provide an integrated health and social care system fit for the future'*.

2. **Recommendation(s)/Proposed Action**

The Health Scrutiny Panel is recommended to note the report and the progress being made in developing the Frimley Sustainability and Transformation Partnership and comment on any aspect of the plan.

3. **The Slough Joint Wellbeing Strategy, the JSNA and the Five Year Plan**

The priorities in the STP reflect the need to improve the health and wellbeing of the population. The STP will focus on those priorities that can be delivered across the system and local areas will continue to address their own local priorities. The Slough JSNA has informed the work of the STP.

3a. **Slough Joint Wellbeing Strategy Priorities**

The STP will meet several of the current Slough Wellbeing Board strategy priorities including:

- Protecting vulnerable children and young people
- Improving healthy life expectancy
- Improving mental health and wellbeing

The STP will do this by delivering across 5 priority areas:

1. Making a substantial step change to improve wellbeing, increase prevention, self care and early detection

2. Improve long term conditions outcomes including greater self management and proactive management across all providers for people with single long term conditions
3. Proactive management of frail patients with multiple complex physical and mental health long term conditions, reducing crises and prolonged hospital stays
4. Redesigning urgent care, including integrated working and primary care models providing timely care in the most appropriate place
5. Reducing variation and health inequalities across pathways to improve outcomes and maximise value for citizens across the population, supported by evidence.

3b. **Five Year Plan Outcomes**

The STP will support the delivery of the following SBC Five Year Plan outcomes:

- Children and young people in Slough will be healthy, resilient and have positive life chances
- More people will take responsibility and manage their own health, care and support needs

4. **Other Implications**

(a) Financial

One of the aims of the STP is bring financial balance to the Frimley footprint by 2020 – across health and social care. There is a significant financial pressure facing all parts of the system and the plan will address how these pressures will be managed.

Any future investment from the NHS in local systems will come via the STP process.

(b) Risk Management

<i>Risk Area</i>	<i>Risk/Threat/Opportunity</i>	<i>Mitigation(s)</i>
<i>Financial All parts of the system are facing financial challenge due to increasing demand and rising costs</i>	<i>Priority areas do not manage the financial pressures – or actions cause additional financial pressures across one part of the system or service area</i>	<i>The STP gives a system wide view and management of the whole of the footprint. Aim is to bring the whole system into financial balance</i>
<i>Property Decisions are not made about current or future use of assets that help deliver the STP ambitions</i>	<i>Each part of the system or individual service continue to make decisions on their own irrespective of STP ambitions</i>	<i>STP will support via system leaders group to have a cohesive few of assets and estates. A one public estate strategy is being developed</i>
<i>Employment Issues Not having sufficient or trained staff to deliver new ways of working</i>	<i>Each organisation already has issues of recruitment and retention of staff</i>	<i>STP priority focus on our workforce, health and social care staff will be reviewed as a whole with new roles and ways of</i>

		<i>working considered to best meet the needs of our residents.</i>
<i>Equalities issues Health inequalities</i>	<i>The specific health issues of the Slough population will not be met by the STP priorities</i>	<i>STP has focussed on the main health issues across the footprint and this includes Sloughs priority health issues.</i>
<i>Communications The ambitions of the STP are not well understood by all parts of the system</i>	<i>Different parts of the system, workforce, residents, providers and communities have differing understanding and knowledge of the changes</i>	<i>Regular comms and workshops, briefings across the system. A unified approach of strategic direction will enable clearer communication to staff and residents.</i>

(c) Human Rights Act and Other Legal Implications

There are none identified at this point.

(d) Equalities Impact Assessment

This will be undertaken as specific plans are developed to deliver the priorities.

(e) Workforce

There are no specific issues identified at this point but as workforce is one of the enablers for the delivery of the plan this will have significant focus over the coming months.

5. **Summary**

<ul style="list-style-type: none"> • Positive outcome of revenue funding bids from the sustainability and transformation fund • Waiting to hear about recently submitted capital bids • Work streams are all under way and at various stages of development and delivery • Recent announcement by NHS England that Frimley STP will be one of 9 national STP's that will be supported to move to an Accountable Care System • Single Governing Body in common for the three East Berkshire CCG's has started • New governance in place for the STP with new decision making board and an enhanced role for health and wellbeing boards.

6. **Supporting Information**

As part of the NHS Forward Plan each health and social care area across the country has produced a five year Sustainability and Transformation Plan starting in 2015/16. The footprint for each area was prescribed by NHS England and for Slough this is the Frimley footprint. This covers the populations of Slough, Windsor, Ascot and Maidenhead, Bracknell and Ascot, Surrey Heath and NE Hampshire and Farnham CCG's – approximately 750,000 people. Sir Andrew Morris Chief Executive of the Frimley NHS Trust is the senior responsible officer for the Frimley Health and Care STP.

- 6.1 The plan relates to people of all ages for physical, psychological and social wellbeing, for carers and their families and covers health and social care support. A gap analysis was carried out across health and social care which helped validate the priorities and initiatives.
- 6.2 The governance for the STP is described below:
- The **Frimley STP decision making board**. One senior officer representing each of the 13 statutory organisations with the responsibility for the delivery of health and social care services.
 - A newly established **Health and Wellbeing Board Alliance Board**. This will be chaired by Sir Andrew Morris and attended by the chair and vice chair of each of the 5 health and wellbeing boards across the STP.
- 6.3 The three East Berkshire CCG's have from 1st April 2017 moved to:
- Having a single Governing Body in common
 - Having a single primary care commissioning committee in common
 - Strengthening (GP) member meetings including public involvement
 - Expanding clinical leadership capacity
 - Streamlining assurance process
 - Operating a financial risk share across all three CCG's
- 6.4 Seven STP work streams have been established to deliver the priorities over the coming two years. These are at various stages of development and it is suggested that progress against delivery of each of these and their impact for Slough is reported on a regular basis to the Panel.
- The 7 workstreams are:
- Shared Care Record
 - Integrated Care Decision Making Hubs
 - GP Transformation
 - Unwarranted Variation
 - Care and support market
 - Support Workforce
 - Prevention
- 6.5 An underpinning programme of transformational enablers includes:
- A. Becoming a system with a collective focus on the whole population.
 - B. Developing communities and social networks so that people have the skills and confidence to take responsibility for their own health and care in their communities.
 - C. Developing the workforce across our system so that it is able to deliver our new models of care.
 - D. Using technology to enable patients and our workforce to improve wellbeing, care, outcomes and efficiency.
 - E. Developing the Estate via the one public estate project.

6. **Comments of Other Committees**

The STP is a standing item on the Slough Wellbeing Board agenda.

7. **Conclusion**

Significant progress has been made in developing and starting to deliver the Frimley STP. The Health Scrutiny Panel is asked to note and comment on the STP and progress made.

8. **Appendices Attached**

None

9. **Background Papers**

The plan can be found at <http://www.slough.gov.uk/council/strategies-plans-and-policies/sustainability-and-transformation-plan.aspx>

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SLOUGH BOROUGH COUNCIL

REPORT TO: Health Scrutiny Panel **DATE:** 10th July 2017

CONTACT OFFICER: Dave Gordon – Scrutiny Officer
(For all Enquiries) (01753) 875411

WARDS: All

PART I
FOR COMMENT & DECISION

HEALTH SCRUTINY PANEL – 2017/18 WORK PROGRAMME**1. Purpose of Report**

1.1 For the Health Scrutiny Panel (HSP) to identify priorities and topics for its Work Programme for the 2017/18 municipal year.

2. Recommendations/Proposed Action

2.1 That the HSP:

- 1) identify the major issues it would like to cover in the 2017/18 municipal year; and
- 2) agree, where possible, timing for specific agenda items during the 2017/18 municipal year.

3. The Slough Joint Wellbeing Strategy, the JSNA and the Five Year Plan

3.1 The Council's decision-making and the effective scrutiny of it underpins the delivery of all the Joint Slough Wellbeing Strategy priorities. The HSP, alongside the Overview and Scrutiny Committee and the other 2 Scrutiny Panels combine to meet the local authority's statutory requirement to provide public transparency and accountability, ensuring the best outcomes for the residents of Slough.

3.2 The work of HSP also reflects the following priority of the Five Year Plan:

- Our people will become healthier and will manage their own health, care and support needs.
- Our children and young people will have the best start in life and opportunities to give them positive lives

3.3 Overview and Scrutiny is a process by which decision-makers are accountable to local people, via their elected representatives for improving outcomes relating to all priorities for the Borough and its residents. Scrutiny seeks to influence those who make decisions by considering the major issues affecting the Borough and making recommendations about how services can be improved.

4. **Supporting Information**

4.1 The purpose of scrutiny is to hold those that make decisions to account and help Slough's residents by suggesting improvements that the Council or its partners could make.

4.2 Prioritising issues is difficult. The scrutiny function has limited support resources, and therefore it is important that the work scrutiny chooses to do adds value.

4.3 There are three key elements that make up the responsibilities of the scrutiny function:

- provide transparency and public accountability for key documents relating to the financial management and performance of the Council;
- scrutinise significant proposals which are scheduled for, or have been taken as, a Cabinet/Officer delegated decision; and
- strategic shaping of service improvements relating to the Cabinet Portfolios of Finance & Strategy and Performance & Accountability

4.4 In considering what the HSP should look at under points two and three above, Members are invited to consider the following questions:

- *To what extent does this issue impact on the lives of Slough's residents?*
- *Is this issue strategic and pertinent across the Borough?*
- *What difference will it make if HSP looks at this issue?*

5. **Suggested Topics**

5.1 It is generally recommended that a Scrutiny Committee should aim to look at no more than 3 or 4 items in any one meeting. This limited number can prove challenging, but does allow the Committee to delve down into specific subject areas and fully scrutinise the work that is being undertaken.

5.2 This will be a continuous process, and flexibility and responsiveness vital to success. It is important not to over-pack the Committee's agenda at the start of the year, which will not allow the flexibility for the Committee to adapt to take into consideration issues that have arisen during the year.

6. **Resource Implications**

6.1 Overview and Scrutiny is supported by 1 FTE member of staff. This officer is responsible for support the O&S Committee and three Scrutiny Panels. Therefore, this is a finite resource and consideration must be given, in conjunction with the work programmes for the three Scrutiny Panels, as to how the resource is used during the year.

7. **Conclusion**

7.1 The scrutiny function plays a key role in ensuring the transparency and accountability of the Council's financial and performance management, and strategic direction. The proposals contained within this report highlight some of

the key elements which the Committee must or may wish to scrutinise over the coming municipal year.

- 7.2 This report is intended to provide the HSP with information and guidance on how best to organise its work programme for the 2017/18 municipal year. As previously stated, this is an ongoing process and there will be flexibility to amend the programme as the year progresses, however, it is important that the Committee organises its priorities at the start of the year.

8. **Appendices Attached**

A - Draft Work Programme for 2017/18 Municipal Year

9. **Background Papers**

None.

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HEALTH SCRUTINY PANEL
WORK PROGRAMME 2017/2018

Meeting Date
29 June 2017
<ul style="list-style-type: none"> • Range of community based services for those with learning disabilities • Adult Social Care – programme update • STP Update
31 August 2017
<ul style="list-style-type: none"> • Mental Health – early identification and intervention • STP Update
10 October 2017
<ul style="list-style-type: none"> • STP Update • Safeguarding Annual Report
22 November 2017
<ul style="list-style-type: none"> • STP Update
18 January 2018
<ul style="list-style-type: none"> • STP Update • Adult Social Care – programme update
26 March 2018
<ul style="list-style-type: none"> • STP Update

To be programmed:

- Adult Social Care – Care Programme
- Slough Five Year Plan - Our people will become healthier and will manage their own health, care and support needs
- Berkshire Healthcare NHS Foundation Trust – Annual Report
- NHS Frimley Health Foundation Trust
- CCG Operating Plan
- Public Health Programme
- 0 – 19 Service Re provision
- Residents' Involvement in Shaping Services
- Community Hubs